



TEN to END

A 10-year plan
to end chronic
homelessness
in our communities
*prepared in
collaboration with the*

City of Attleboro

City of Taunton

United Way of Greater Attleboro/Taunton

Table of Contents

- I. Introduction
- II. Letter from The Mayors
- III. Plan Participants
- IV. Homelessness: The Numbers and Demographics
- V. Regional Partners
- VI. Planning Process
 - i. Definition of the Chronically Homeless
 - ii. Mayor's Task Force on Ending Homelessness (the Leadership Committee)
 - iii. Ten Year Plan Working Group (and subcommittees)
- VII. Objectives, Goals and Actions Steps
 - i. Prevention
 - ii. Services
 - iii. Housing
 - iv. Employment
- VIII. Implementation
- IX. Conclusion
- X. Acknowledgements
- XI. Addendum
 - i. Services Inventory Chart
 - ii. Progress Report: Number of Chronically Homeless
 Number of New PSH units created

December 20, 2011

Dear Residents, Businesses, & Guests of our Great Cities:

It is our pleasure to present to you our 10-year Plan to End Chronic Homelessness (within the cities of greater Attleboro and greater Taunton). A committed group of concerned community providers (private, non-profit, faith-based, academic, municipal, etc.), consumers, businesses, and citizens have come together in partnership over the past several years in an effort to address and end local chronic homelessness.

The region began planning efforts directed at homelessness in 1999, under the stewardship of United Way of Greater Attleboro/Taunton. This early group eventually became the Greater Attleboro Taunton Coalition to End Homelessness (**GATCH**). GATCH's mission is to address the challenges of homelessness through innovative partnerships, requests for federal financial assistance and leveraging other local resources. The challenges of homelessness include, but are not limited to: the lack of affordable housing, rising prices, illness and disability, a highly depressed economy and lessened job market (exacerbated by barriers such as: skill and educational deficits, limited English and literacy, poverty, unemployment, and poor credit histories).

In 2007, we convened a Leadership Committee comprised of ourselves, service providers, local businesses, municipal agencies, committed citizens, and homeless individuals and families to guide the creation of our Ten Year Plan to End Chronic Homelessness. The Leadership Committee, working in collaboration with GATCH, held strategic planning sessions aimed at resolving chronic homelessness in the Greater Attleboro and Taunton Area. The Leadership Committee provided oversight, while a special Committee comprised of GATCH members and other interested parties, began the work of scripting the Plan.

Outlined in this document are the details of our identified areas of focus, strategies, timelines, data and statistical details, as well as, our overall efforts and plan to make chronic homelessness an issue of our past.

As Chief Elected Officials, we are committed to ending chronic homelessness in our communities. With this plan, and the commitment of our partners, we hope and will work to end chronic homelessness by the end of the decade. We ask that you join us in our effort to combat the challenges of chronic homelessness so that we can make our communities healthier and better places to live, work, and visit.

Sincerely,



Mayor Kevin J. Dumas
City of Attleboro



Mayor Thomas C. Hoyer Jr.
City of Taunton

Participants

Mayors' Leadership Committee:

Mayor Kevin J. Dumas, Mayor of Attleboro: Co-Chair
Mayor Charles Crowley, Mayor of Taunton: Co-Chair
Congressman James McGovern
Ann Friedman
Frank Cook, Attleboro City Council
Oreste D'Arconte, The Sun Chronicle
Dianne DePippo, United Way of Greater Attleboro/Taunton
Susan Jacobs, Attleboro Bar Association
Jack Lank, Attleboro Area Chamber of Commerce
John Lepper, State Representative
Elizabeth Poirier, State Representative
Linda Shyavitz, Sturdy Memorial Hospital
Walter Stitt, Attleboro Public Library
Maureen Tebo, Nations Heritage Credit Union
John Zambarano, Attleboro Housing Authority

Ten Year Plan Steering Committee:

Joseph Azevedo, Office of Economic and Community Development, City of Taunton
Ellen Bruder-Moore, Community Counseling of Bristol County, Inc.
Milly Burrows, Associates for Human Services, Inc.
Robert Cammarata, Department of Human Services, City of Taunton
Dianne DePippo, United Way of Greater Attleboro / Taunton, Inc.
Pastor Jack DeGraca, Father's House Church
Michael Ferreira, Office of Economic and Community Development, City of Taunton
June Fleishman, Department of Human Services, City of Attleboro
Paul Fulton, Eliot Community Mental Health Center
Kim Lavigne, Taunton Housing Authority
Joseph Maia, Community Development Assistant, Attleboro
Chief Richard Pierce, Attleboro Police Department
Charlene Sanger, Department of Human Services, Taunton
Richard Shaffer, Office of Economic and Community Development, City of Taunton
Melissa Vanhorn, Community Impact Coordinator, United Way
John Zambarano, Attleboro Housing Authority

Ten Year Plan Working Group:

Teri Bernett, WEIR Community Development Corporation
Joanne Camara, South Shore Housing Development Corporation
Matt Cianci, Community Counseling of Bristol County
Peter Danzel, Department of Transitional Assistance

Livia Davis, Community Care Services, Inc.
Kelly DeVincentis, Quadrant Software
Marcel Dube
Al Dufresne, Department of Transitional Assistance
Donna Haynes-Dwyer, Century 21
Denise Fortin, Eliot Community Human Services
Heather Gallant, Board of Health, Taunton
Mike Horrigan, Taunton Municipal Lighting Plant
Frances Houston, New Hope, Inc.
Sharon Hurley, South Shore Housing Development Corporation
Chrystal Jones, Life Stream
Art Largey, Our Daily Bread Soup Kitchen
Daniel LeBrun, Eastern Bank
John McCaul, Taunton Redevelopment Authority
Lisa Nelson, Congressional Aid Aide, (Congressman James McGovern)
Cathal O'Brien, Department of Public Works, Taunton
Jacquie O'Brien, Health Department Attleboro
Jeanne Nesto
Brenda Neugeboren, Taunton School to Career
Susan Price, Taunton GED Program
Sue Puleo, Old Colony YMCA
Joan Ricci, The Literacy Center
Mary Ellen Rochette, Pro-Home, Inc.
Peter Rego, Veterans Services, Attleboro
Jane Rudcey, Middleborough Office of Economic & Community Development
Elizabeth Shockroo, Community Development Department of Attleboro
Sue Smith, Attleboro Area Council of Churches
Julie Sprague, Heart of Taunton
Cindy St. Pierre, Community Counseling of Bristol County, Inc.
Happyness Uneka, Family Resource Center
Edward Walsh, Taunton Police Department
John Wilson, Baptist Church

Prevention Committee:

Milly Burrows, Co-Chair, Family Partnerships/Mental Health Manager Early Head Start
Associates for Human Services
Mike Horrigan, Co-Chair, Taunton Municipal Lighting Plant
Heather Gallant, Board of Health, Taunton
Sharon Hurley, South Shore Housing Development Corporation
Cathal O'Brien, Department of Public Works, Taunton
Denise Fortin, Eliot Community Human Services
Sue Smith, Attleboro Area Council of Churches
Charlene Sanger, Department of Human Services, Taunton
Kathy Driscoll, Board of Health, Taunton

Supportive Services Committee:

June Fleishman, Co-Chair, City of Attleboro

Anne Bisson, Co-Chair, City of Taunton

Peter Danzel, Department of Transitional Assistance

Paulo Fulton, Elliot Community Services

Charlene Sanger, Department of Human Services, Taunton

Happyness Uneka, Family Resource Center

Frances Houston, New Hope, Inc

Housing Committee

Kim Lavigne, Co-Chair, Taunton Housing Authority

John Zambarano, Co-Chair, Attleboro Housing Authority

Donna Hyanes Dwyer, Century 21

Teri Bernett, WEIR Community Development Corporation

Mary Ellen Rochette, Pro-Home, Inc

Employment / Work Force Development Committee

Richard Shaffer, Co-Chair, Office of Economic and Community Development,
City of Taunton

Ellen Bruder-Moore, Co-Chair, Community Counseling of Bristol County, Inc

Kelly DeVincentis, Quadrant Software

Joan Ricci, The Literacy Center

Brenda Neugeboren, Taunton School to Career Program

Marcel Dube

Jeanne Nesto

Consultant: Kathryn McHugh

Ten Year Plan Researcher/Drafter and Continuum of Care grant writer

Introduction

The Attleboro and Taunton regional efforts to address and eliminate homelessness began in earnest in 1999 when a group of agencies, working together with the United Way of Greater Attleboro /Taunton, collaborated to submit their first application for Continuum of Care funds to the US Department of Housing and Urban Development.

In order to be eligible for these HUD funds, an applicant must present a well coordinated planning process. In 1999, Continuum of Care funds (or McKinney funds as they were then known) were typically delivered to larger metropolitan communities (also known as entitlement communities) or to the States. In 1999 the State of Massachusetts had 12 such communities (including the State) that were receiving this funding.

In 1999, when the region submitted their first regional application, HUD had not fully considered the possibility of funding a regional planning process. At the time these competitive resources were available to only 12 cities in Massachusetts, with the remaining communities covered by the amount received by the State.

At that time, if the Attleboro/Taunton region were to access any of these funds, they would need to do so from the State's allocation. However, the majority of state funds also were directed to larger cities and towns which left those towns in the Attleboro and Taunton area unfunded. The regional providers, who at the time were serving over 200 homeless households, decided to explore ways to redirect Continuum of Care funds to their area. Working with the AIDS Housing Collaboration's technical assistance team, they submitted their first application in 1999. These applications was successfully funded and helped to set the stage with HUD for other communities to plan regionally.

Currently, in Massachusetts, there are 20 Continuum of Care planning groups receiving HUD Continuum of Care funds for the homeless. These include the original 12 cities that were funded in 1999, along with the State and 7 new regional collaborations. The new regional planning bodies include: Attleboro/Taunton, Brockton/Plymouth, Cape Cod/ the Islands, Franklin/Hampden/Hampshire/Holyoke, Gloucester/Haverhill/Salem/Essex, Malden/Medford, and Pittsfield/Berkshire County. These smaller regional collaborations are creative solutions for getting targeted resources into the local communities. Prior to receiving direct funding, these regional groups had to compete for the State's portion of Continuum of Care funds, which was difficult and, oftentimes, not very successful.

The region has continued to receive Continuum of Care funds since that first application. Currently the region serves approximately 300 homeless households with either emergency or transitional housing or supportive services. It is interesting to note that the numbers of homeless in the region have been consistent over the years even though the resources available to serve them have grown. While this may seem like little progress has been made, the consistent numbers are reflective of improved counting methodology, the addition of additional shelter beds, an influx of homeless individuals to our region in 2005 as a result of the economic crisis and an increase in homeless families in the region. To address the needs of the population, the region has added 65 permanent supported

housing units specifically for the homeless to the inventory of permanent housing. These beds are funded through the Continuum of Care homeless assistance funds.

Other permanent housing resources have been made available through our broad regional planning process which provides a foundation for additional collaborations including coalescing to submit an application to become a HOME Consortium. Previously, access to HOME funds was through a request to the State to access some of their allocation. The region recognized the need for better access to these funds as they provide flexible funds that can be used to provide grants, direct loans, loan guarantees or other funding for projects that either build or renovate affordable housing for rent or homeownership for households that meet the income requirements. The funds can also be used to provide direct rental assistance to low income people.

In 2003 the region was successfully awarded as a HOME Consortium. Today the Greater Attleboro Taunton Home Consortium provides funds to nonprofit and for profit developers to preserve and increase the supply of affordable housing in the community.

In 2005 the region identified a group of underserved homeless as meeting HUD's definition of chronically homeless. The chronically homeless are those individuals or families who experience episodic and long term homelessness and are oftentimes outside of the traditional services system. The Mayors invited John O'Brien, the Deputy Director of the United States Interagency Council on Homelessness, to a meeting to discuss the development of a plan to address the needs of this specific subpopulation.

In 2007, the Mayors convened a Leadership Committee on Ending Chronic Homelessness. The role of the Leadership Committee was to guide the creation of the Plan. The actual development of the plan was coordinated by the Greater Attleboro and Taunton Coalition on Homelessness (GATCH), under the stewardship of the United Way of Greater Attleboro and Taunton.

The Committee held an initial strategic planning session, the purpose of which was to engage in creative thinking about addressing and solving chronic homelessness issues in Attleboro and Taunton. The Leadership Committee remained involved during the development of the Plan through oversight and review. The Leadership Committee designated the actual work of developing the Plan to a special Committee, comprised of GATCH members and other interested parties.

The Committee to End Chronic Homelessness identified four working subcommittees to explore the four critical areas of supports necessary to move the chronically homeless to sustainable permanent housing solutions:

- Prevention
- Supportive Services
- Affordable Housing
- Employment

The Committee, and their four working groups, is comprised of the Mayors, numerous supportive providers, various municipal agencies, committed citizens and homeless individuals and families. Their work has been guided by the Federal Interagency Council on Homelessness and the U.S. Department of Housing and Urban Development. Each committee developed a work plan to address needs and gaps in the continuum of care for these chronically homeless and then devised targeted strategies to address these needs.

The work and recommendations of these committees are presented later in this plan.

Executive Summary

The Greater Attleboro and Taunton Coalition for the Homeless conducts an annual count of the homeless and chronically homeless during the third week of January. On January 26, 2011, there were 224 people homeless in the region. Of these 224, 75 were single adults and 149 were families (within 57 family households). There were 17 chronically homeless individuals and no report of chronically homeless families.

These numbers represent a decrease in regional homelessness since the all time high in 2005 when there were 275 homeless individuals and families, of whom 72 were considered chronically homeless. The decrease in the overall homeless number and the chronically homeless number can be primarily attributed to efforts of the GATCH in applying for and receiving Continuum of Care homeless assistance funds. The majority of the funds received have been for permanent supported housing. These permanent targeted housing units have helped to decrease the number of homeless households in the region over the years. The region has requested funds for only two transitional housing programs that were deemed critical to the region (one for victims of domestic violence and one for the severely mentally ill).

In 2004 the U.S. Department of Housing and Urban Development (HUD) announced a special initiative (the Samaritan Bonus) that was targeted to the chronically homeless. This funding was available through the Continuum of Care Homeless Assistance Grant. The GATCH submitted a request for \$416,695 (3 years of funding) for the Homes With Heart program to serve 8 chronically homeless individuals. Since that initial request the GATCH has funded 4 more projects that provide permanent supportive housing to the chronically homeless.

While HUD was incorporating incentives to fund housing units for the chronically homeless into their Continuum of Care application, the federal government, under the leadership of the United States Interagency Council on Homelessness (USICH), was also announcing a special initiative to decrease chronic homelessness within a ten year period. This was known as the Ten Year Plan to End Chronic Homelessness.

Creation of a Ten Year Plan to End Chronic Homelessness is driven by the federal USICH and HUD. These agencies, through their directed work, came to understand in the 1990's that solving the problem of chronic homelessness needed to be a priority.

They also understood that the issues confronting this population required a coordinated approach in order to be effective. As a result, in 2001, they announced a goal of ending chronic homelessness in ten years. Communities were asked to begin to develop a directed approach to ending chronic homelessness with a formalized plan. The region began their initial efforts in 2007 to develop a formal plan, although GATCH had been planning around the needs of the homeless since 2002.

Until 2010, the federal government had defined a person experiencing chronic homelessness as an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or has had at least four episodes of homelessness in the past three years. In 2010 the definition was expanded to include homeless families with at least one adult member who has a disabling condition and also meets the other requirements of episodic homelessness.

The U.S. Interagency Council on Homelessness estimates that individuals who are *chronically* homeless use 50% or more of the resources allocated to homeless services. The average chronically homeless individual costs at least \$40,400 in public resources each year. For many individuals who meet HUD's definition of *chronic* homelessness, they have a disabling condition of untreated mental illness, substance abuse, or a combination of both.

The Greater Attleboro and Taunton region has seen a decrease in the number of chronically homeless individuals since they first began tracking them in 2003. In 2005 the region counted 72 chronically homeless individuals and had 50 units of permanent supported housing targeted to the homeless (none of these were specifically targeted to the chronically homeless). In 2011 the number of chronically homeless was 18 (none were families) and the region had 65 permanent supportive housing units of which 19 were dedicated to the chronically homeless (these are one and two bedroom units serving a total of 25 previously chronically homeless in permanent supported housing).

The problem of homelessness, and resultant chronic homelessness, has been greatly exacerbated during the past several years by a dire economy, the foreclosure crisis, and budget cuts to essential programs, especially substance abuse detoxification services, affordable housing, and core human service programs funded by the Commonwealth of Massachusetts and the federal government.

Individuals who find themselves homeless face immediate barriers to housing related to a variety of factors: low wage jobs, active alcohol and drug use, criminal history, poor tenancy and eviction histories, poor credit history, poverty and unemployment, limited English and poor literacy, and a lack of skills and employability.

The region's awareness of homelessness as an ongoing problem has increased over the years but many residents still remain unaware of the connections between everyday problems such as high rents, rising prices, a tight job market, limited access to manufacturing jobs or service sector jobs, rising housing prices, and prisoner re-entry issues that can lead to or exacerbate homelessness.

The system that developed over time to move homeless individuals from the streets to permanent housing did not initially target those who were chronically homeless. Moreover, historically, admission to housing and service programs for homeless people has typically been based upon “housing readiness” or what was deemed a potential for long term stable tenancy. This left many people structurally separated from the programs designed to help them. The concept of “housing readiness” was challenged by advocates who recognized that many homeless did not need to move slowly through a continuum of choices but could go directly from the street to a housing unit. This is referred to as *“Housing First”*.

Over the years shifts in regional economics, the foreclosure crisis, and pressure on average rents and home prices have resulted in a demand for the services of many of the agencies serving the homeless. While the regional homeless providers have responded to demand by adding beds targeted to the homeless, the limited amount of Continuum of Care homeless assistance funds available for new programs has not allowed providers to keep up with the demand. As a result there are still a number of chronically homeless individuals that remain to be helped. In addition there are the hidden homeless, individuals and families doubled up with family and friends who may not yet met the definition of chronically homeless but may well be on their way.

This plan, and the commitment of our plan participants and partners, will help to continue to combat the problem of chronic homelessness.

Homelessness: The Numbers and Demographics

Estimates on the numbers of homeless households in the United States have varied based upon differences in the various counting methodologies used. At the height of the homelessness problem in the eighties, the Center for Creative Non Violence conducted a count that relied upon data from service providers in 14 cities which was then extrapolated nationally to conclude that approximately 3 million people were homeless, either on the street or living in shelters or unsafe living conditions.

In 1990 the Census Bureau attempted to count the unsheltered homeless living on the street and concluded that approximately 230,000 people were homeless on the streets.

In 1996 the US Interagency Council on Homelessness contracted with the Urban Institute to conduct a count relying upon data from soup kitchens, emergency shelters and other homeless service providers. This study found that approximately 842,000 people were homeless.

In 2009 the National Alliance to End Homelessness (NAEH) conducted a national count which relied upon information reported by local communities in their Continuum of Care applications for Homeless Assistance funds to HUD and found that approximately 656,000 people were homeless. Within those 656,000 homeless households, 112,000 were defined as chronically homeless, or about 17%. Nationally there was a slight increase of 3% in the chronically homeless population from 2008. In Massachusetts the numbers of chronically homeless counted went down by 17% from 2008 to 2009. The GATCH reported 5% decrease in 2009 in the number of chronically homeless persons.

Over the years, the methodologies have become more reliable as they are no longer based upon extrapolations of a small sample size, but, instead, utilize the information provided by all 52 states who are submitting accurate point in time count data as part of their Continuum of Care applications for homeless assistance.

Using the information compiled by GATCH, the basic composition of the Attleboro/Taunton region's homeless, as of the 2011 point in time count, is:

- 54% of them are living in emergency shelter
- 15% of them are unsheltered and living on the street
- 33% of them are single
- 66% of them are families
- 7 % are chronically homeless

With 224 people homeless in the region, Cities, the GATCH, the service partners, and others, will continue their efforts to combat homelessness. In partnership with the federal, state and local governments, the region will continue to plan around the needs of the chronically homeless. This Ten Year Plan to End Chronic Homelessness represents a

comprehensive planning strategy that leverages resources; both existing and new, to provide housing and flexible supports for the chronically homeless.

Regional Partners

Greater Attleboro/ Taunton Coalition to End Homelessness (GATCH)

Since the Northern Bristol County region is comprised of a cohesive group of small and medium sized communities with limited resources, their various committees and planning bodies have come together under one regional planning group known as the Greater Attleboro/ Taunton Coalition to End Homelessness (GATCH). GATCH realized that the only way to develop an effective strategy for combating homelessness was to bring all of the key individuals into the planning process as a means of leveraging existing and additional resources. Coalition members recognized that direct involvement of the local housing authorities, United Way of Greater Attleboro/Taunton, and the Attleboro and Taunton Economic and Community Development Departments would provide an opportunity to build effective linkages; linkages that could result in funding and programming targeted to the homeless. The vision, which shapes the overall strategy for ending homelessness in the Greater Attleboro/Taunton region, has also framed the strategy for ending chronic homelessness. This overall strategy is that through effective collaboration and linkages they can *move individuals and families to permanent housing and self sufficiency*.

From that, a strategy for the chronically homeless was developed in partnership with the Mayors of Attleboro and Taunton. The strategy for ending chronic homelessness identifies affordable housing as the most critical component of moving the chronically homeless off the street. Some will do this through a Housing First strategy whereby a chronically homeless person is moved directly into housing and may or may not require wrap around services. Or, for those chronically homeless best served by a combination of housing and services, the chronically homeless will be engaged and then moved through the system toward permanent housing. The primary components of an effective system are flexible and comprehensive supportive services, permanent affordable supportive housing, and access to entitlement programs or employment to improve incomes.

United Way of Greater Attleboro/ Taunton (UWGAT)

UWGAT's mission is to *"to do the most possible good for the greatest number of people; to help people in need through a caring, volunteer-driven organization; to raise and distribute funds for programs and services that respond to current, critical and emerging community needs; to find long-term solutions to community problems, and to improve the quality of life for all of our neighbors"*.

UWGAT has also become a central coordinator of all regional activities and committees in the community. UWGAT has provided space and staff support to a variety of

committees and task forces. This growth and evolution has fully integrated them as the Convening Agency for the South Coast Regional Network To End Homelessness (SOCO). These efforts have also supported effective cross coordination of local and regional networks, championing collaborations and building community capacities to identify and meet current and emerging needs.

South Coast Regional Network

In 2008, the Massachusetts Interagency Council on Housing and Homelessness (ICHH) released a request for **Regional Network Innovations to End Homelessness** to fund six effective regional networks across the Commonwealth. The region responded with a proposal to develop what has become the South Coast Regional Network. The South Coast Regional Network is an integrated, streamlined, regionally-based network that is comprised of the homeless planning groups from New Bedford, Fall River and the Greater Attleboro/Taunton area. The goal of the regional networks is to provide better coordination and local innovations that can effectively eradicate homelessness. They also provide a forum for shared planning and leveraging of resources.

The primary work of the South Coast Regional Network centers on the following:

- 1.) Transforming the regional homeless service provision into a systemic process focusing on diversion, prevention, and stabilization efforts by prioritizing regional resources for EA eligible clients in order to maximize and leverage resources, establish measurable outcomes, institute an integrated approach and further engage political supporters to positively affect change.
- 2.) Create a homeless services environment in which intake and assessment is done in a uniform, coordinated manner across all Continuums of Care within the South Coast Region.
- 3.) Ensure consistent data collection throughout the entire region: A Regional Coordinator will work closely with service providers and Department of Housing and Community Development (DHCD) to ensure service provision, data collection, and outreach efforts to increase awareness and client identification.

Self Sufficiency Coalition

This group includes representatives from Attleboro, North Attleboro, Mansfield and Norton and was formed to address the needs of the growing number of homeless families from outside the region who were being placed in hotels and motels along Route 1 in Attleboro. At that time the Coalition gathered statistics on homeless families and advocated with the legislature to open a family shelter in the Attleboro area. This resulted in the opening of the Family Resource Center, a multi service center with an emergency shelter for those homeless families referred by the Department of Transitional Assistance.

Attleboro Homeless Coalition

By the 1990s the Attleboro Homeless Coalition had become increasingly aware of a growing homeless population and the factors that were contributing to this such as mental health issues, limited education, and lack of job training. It was at this time that they decided to merge with the Hunger Committee of the United Way of Greater Attleboro/Taunton. This was beneficial to both groups as it brought a broader view into the planning discussion.

Taunton Emergency Task Force Subcommittee on Homelessness

This group is a local coalition under the umbrella of GATCH. It was formed in 1996 after homelessness was identified as a growing population at a roundtable forum on Substance Abuse. At that early point, providers indicated that there was a significant need for supportive, scattered site transitional and permanent housing for the homeless. The group began to explore the possibility of applying for Continuum of Care Assistance. Extensive outreach was done to expand and diversify the membership of the group. At that time, the group began to identify resources and gaps in services for the homeless in the Taunton area.

Taunton Coalition on Homelessness

This coalition is a subcommittee of the Taunton Emergency Task Force. It was decided in 2000 that inclusion in this broader task force would result in better coordination of programs and leveraging of mainstream resources. One of the goals of GATCH is to bring homelessness into all levels of planning for the region. The Taunton Emergency Task Force is a citywide task force that represents local agencies dealing directly or indirectly with conditions that are detrimental to the health, safety and social well being of any individual or family in the Taunton area. Their objective is to supplement existing services and create a more comprehensive and systematic approach in dealing with citizens in emergency situations.

The Planning Process

The regional network of agencies, towns and individuals serving the homeless in the Greater Attleboro and Taunton area have been working collaboratively since 1999 when they began planning to submit a regional application for Continuum of Care Homeless Assistance funds to the US Department of Housing and Urban Development (HUD). This was one of the first regional requests for Continuum of Care funds. Planning on a regional level had not previously been incorporated into the funding paradigm for Continuum of Care funds. Much of the McKinney funding had previously been going to metropolitan communities or to the various States' executive housing offices (here in Massachusetts the Balance of State funding is distributed by the Department of Housing and Community Development). These State allocates apportioned their homeless assistance dollars to those communities not receiving direct funding. In Massachusetts much of the funding also went to the larger entitlement communities to help address what was perceived as their larger problem of homelessness. This resulted in the sprinkling of a few dollars around the state but not enough resources to address the systemic issues of homelessness.

Attleboro and Taunton's first regional application for Continuum of Care homeless assistance funds drew upon the expertise and resources of many in the region including both the Mayor of Attleboro and the Mayor of Taunton. These Mayors remained committed to addressing the needs of the homeless in their region and supported the ongoing infrastructure needs of the Continuum of Care annual application process.

The Greater Attleboro and Taunton Coalition on Homelessness (GATCH), the lead for the regional Continuum, submitted a comprehensive request to begin to address the needs of the homeless in their region. As a result of their creative thinking, their request for \$262,500 was funded. Since then more communities throughout the nation have joined together to plan regionally, rurally, and otherwise to address the localized needs of their homeless families and individuals.

After this first successful round of direct funding, the planning body for GATCH grew and partnerships and collaborations were formed to leverage other resources. In 2006 the Mayor of Attleboro and the Mayor of Taunton began meeting with GATCH to understand and plan for the needs of the chronically homeless. A Committee to End Chronic Homelessness was established, subcommittees were formed, the plan was drafted and eventually reviewed by the GATCH and Leadership Committee.

Planning Process:

i. Definition of the Chronically Homelessness

The chronically homeless are a specific subset of the homeless population who require directed and consistent outreach, services and/or housing in order to successfully and permanently transition from homelessness. HUD considers an individual or family to be chronically homeless if that individual or family:

- i. is homeless and lives or resides in a place not meant for human habitation, a safe haven, or is in an emergency shelter;
- ii. has been homeless and living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter *continuously* for at least 1 year or on at least 4 separate occasions within the last three years; and
- iii. has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act 2000), post traumatic stress disorder, cognitive impairments resulting in brain injury, or a chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions.

It should be noted that in 2010, the definition of chronically homeless was expanded by HUD to include families. Previously, a chronically homeless person was identified as an unaccompanied *individual* with a disabling condition who had been homeless for a year, or, who had a last 4 episodes of homelessness during a three year period.

Nationally, advocates for the homeless had been expressing the need to incorporate homeless families into the definition, as many families also were also struggling with chronic homelessness. The Attleboro/Taunton region had earlier recognized the problem of families experiencing chronic homelessness and began counting them before HUD formally recognized it as a need. The experience in the Attleboro / Taunton region, as reported from emergency shelter specialists and outreach workers, and evidenced by the point in time counts, is that the regional homeless population has shifted over the years from primarily unaccompanied adults to families. This trend has also been observed nationally.

Planning Process:

ii. The Mayor's Task Force on Ending Homelessness *The Leadership Committee*

The Mayors of Attleboro and Taunton convened a small working group in 2006 to identify a strategy to help those chronically homeless households in the region. This group was initially convened as the **Mayors' Committee to End Chronic Homelessness** but, later, once formed, was renamed as the **Ten Year Plan Working Group**. The Working Group was charged by the Mayors with the task of formulating a plan to bring all the necessary partners into the planning process and forming the needed subcommittees to do the work of developing a *Ten Year Plan to End Chronic Homelessness*.

One of the first things the Mayors' Committee to End Homelessness did was to identify the need for a **Leadership Committee**. This committee would bring in key stakeholders from different business sectors. These stakeholders would prove critical to the success of the plan. The Mayors, working with a small group of concerned individuals from GATCH, created a list of those critical stakeholders and invited them to an initial meeting to introduce the concept of the Plan. Attendees were introduced to the goals of the Ten Year Plan asked for their support. This support would be either a time commitment or resources that could be made available to help the chronically homeless. Resources would include cash assistance, internships, employment, housing referrals, resources for prevention, etc. Once the support of these early stakeholders was secured the next step was to form the Leadership Committee.

In 2007 the Mayors held a Leadership Summit at the Holiday Inn in Taunton, MA. At the Summit the Mayors gave a presentation on the rise of regional homeless, the impact on community resources and the goal of developing a plan to help ease the problem specifically related to chronic homelessness. This meeting resulted in the establishment of The Mayors' Leadership Committee.

The Leadership Committee met a number of times. These meetings focused on the following areas and outcomes:

- Understanding the issue of homelessness in the region

- The role of community in solving homelessness
- Understanding the gaps in the current regional network of housing and services available to the homeless
- Develop a Mission Statement
- Empower the smaller Ten Year Plan Working Group to develop the plan through a series of meetings, focus group sessions and committee work.

The following mission statement was adopted by the Leadership Committee and used to help shape the work of the Ten Year Plan Working Group.

Mission Statement of the Leadership Committee

The homeless are a vulnerable population who are members of our community. As such, they should be treated fairly and with dignity. As a community, we are here to support them as they move toward permanent housing. To the extent possible, our communities will attempt to assist them with housing, services and employment opportunities. This will be done through leveraging appropriate resources and utilizing existing resources.

The Mayors and the Leadership Committee decided to organize the work of the Ten Year Plan under the umbrella of the Greater Attleboro / Taunton Coalition for the Homeless (GATCH). The GATCH is the regional planning body for the homeless and is also responsible for submitting the annual Continuum of Care application for Homeless Assistance funds to HUD. The GATCH would provide the infrastructure and support for all Ten Year Plan activities including: providing meeting space for the committees, providing staff to support the work of the committees, and ensuring involvement of all necessary partners.

Planning Process: iii. Ten Year Plan Working Groups

In 2008, the Leadership Committee identified the need for a smaller group to act as the driver of the plan. This group was initially formed as the Steering Committee of the Committee to End Chronic Homelessness. The role of the Steering Committee was to be the impetus for ensuring that the Ten Year Plan was developed and that the necessary committees were established to do the work. They were a small committed subset of the larger Mayors' Committee to End Chronic Homelessness (aka Ten Year Plan Working Group).

Membership in the Steering Committee was guided by GATCH, the Leadership Committee and the Mayors. Members include key municipal officials, business leaders, and key agencies working with the homeless.

The Steering Committee met for the first time in 2008. At this meeting they revised the name of the Committee to End Chronic Homelessness to the Ten Year Plan Working

Group. The Steering Committee met periodically during the process of developing the Plan to receive updates from the Ten Year Plan Working Group.

Mission Statement

Ten Year Plan Working Group

As representatives of the Mayor of the City of Attleboro and the Mayor of the City of Taunton, we will strive to implement their vision of eliminating homelessness in our community by ensuring that the adequate resources are available to serve those individuals who are homeless and move them out of homelessness into appropriate housing with comprehensive services if needed.

The Ten Year Plan Working Group acts as the primary body, charged by the Mayors and the Mayors Leadership Committee, with developing and implementing the Ten Year Plan to End Chronically Homeless. One of their first tasks was to hold a series of community forums during 2008. These forums provided an opportunity for the community, many of whom were not members of the Ten Year Plan Working Group, to add their voice to the Plan. Participants were able to discuss concerns, discuss resources, review gaps in service delivery, and brainstorm about possible programs or projects that might make a difference in moving the chronically homeless toward stable housing.

As a result of these forums, four primary areas were identified as key to the success of moving the chronically homeless into stable long term housing. The Ten Year Plan Working Group set up four committees to develop goals and action steps for these four critical areas.

Ten Year Plan Working Committees

- ❖ Prevention Committee
- ❖ Supportive Services Committee
- ❖ Affordable Housing Committee
- ❖ Employment Committee

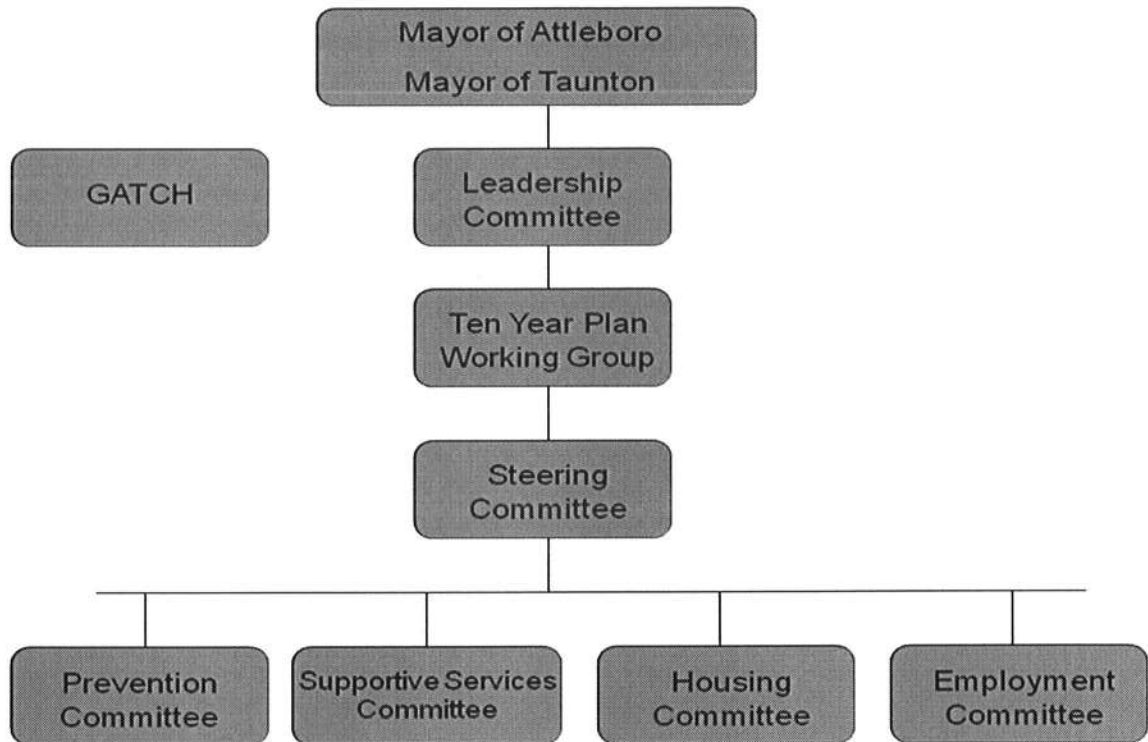
Each Committee was asked to do the following:

- Catalogue the existing inventory of services/programs in four categories (Prevention, Supportive Services, Employment or Housing);
- Outline the gaps in each category;
- Identify goals (and the process for implementing these goals) necessary to eliminate these gaps;
- Establish some action steps for achieving the goals;
- Look at resource availability for achieving goals;
- Develop a method for measuring our success.

The committees meet during 2008 and early 2009. Committee members explored the issues contributing to chronic homelessness that might be alleviated by directed interventions. They also develop a matrix that:

- Identified the problem
- Identified the gaps in the continuum related to solving the problem
- Identified a goal with action steps and outcomes for each gap
- Identified a Responsible Party to monitor implementation of each action step
- Identified a timeframe for success
- Identified available resources

Greater Attleboro/Taunton Ten Year Plan To
End Chronic Homelessness
Organizational Chart



Prevention Committee: Gaps, Goals and Action Steps

Preventing homelessness is the first step to solving what can eventually evolve, unchecked, into the longer term problem of chronic homelessness. Prevention programs ensure that individuals and families do not end up homeless. Providing adequate prevention resources is known as *closing the front door*. Closing the front door means for those households at risk of homelessness, can receive the help they need, and resolve their economic or psychosocial problems, before they result in homelessness. This is critical because without adequate prevention resources, a short-term crisis may become a long-term chronic homelessness situation.

“Homelessness must be viewed as an emergency situation, not someone’s housing status.”
Committee Member

Outreach is an important component of prevention as it can help close the front door to homelessness. There are a number of targeted outreach activities in the region to help connect services to those homeless persons may need them.

- The Department of Veterans Services representatives visit the emergency shelters to determine eligibility for mainstream veterans services and resources.
- The DMH PATH (Projects for Assistance in Transition from Homelessness) specialist visits area shelters and other areas where people at risk congregate, to outreach to the seriously mentally ill to assess their need for services and link them to the mainstream mental health system. Until the person makes a successful transition to services the PATH specialist provides ongoing case management to the seriously mentally ill individual.
- Morton Hospital Infectious Disease Physicians Group has a specialized outreach program targeted at homeless persons with HIV and AIDS. Homeless Individuals are referred from the region’s service providers. In addition the Physicians visit area shelters, in an attempt to encourage those infected to come in for treatment.
- Community Counseling of Bristol County (CCBC), the largest provider of HIV/AIDS related services in the region, conducts a direct outreach program at the area prison. This is coordinated with the Bristol County Sheriff’s Office, an active member of GATCH. Inmates at the prison are referred to service prior to release from the prison in an attempt not only to connect people with services but also to limit episodes of chronic homelessness. This is done in coordination with the Department of Corrections discharge plan which ensures that no inmate will be discharged to the street.
- The Department of Public Health funds a specialized HIV outreach worker targeted to the area who works with shelter staff and other supportive services staff to identify those at risk and encourage testing and treatment and linkage and referral to services. In addition, those homeless individuals identified at risk are referred to CCBC for housing and/or services, where they are linked to specialized counseling and an anonymous testing program.

Targeted outreach is the best way to ensure that those households at-risk of becoming homeless are identified and stabilized in their home. Factors that may put someone at risk of homelessness include:

- Paying more than 30% of your income toward housing costs
- Increasing arrearages in rent/mortgage payments or utilities
- Income is below 30% of the Area Median Income
- Living in overcrowded situation or doubled up
- Eviction notice received

The Prevention Committee conducted an inventory of prevention programs in the region which identified the following available programs:

CURRENT INVENTORY OF PREVENTION PROGRAMS

Housing Search Assistance:

- Provider - Family Resource Center: Housing Search Prevention Program (HSPP) serving 15 families
- Provider - Community Counseling of Bristol County: Community Housing Innovations Programs (CHIP) serving 8 people with HIV

Rental / Mortgage Assistance:

- Providers- Taunton Emergency Task Force, and The Greater Attleboro District Society of St. Vincent dePaul provide assistance for rent and mortgage assistance, utility arrearages, transportation, or other unforeseen emergencies. Money is provided by the Emergency Food and Shelter Program, United Way of Greater Attleboro/Taunton, donations, and local fundraisers.

Tenant/Landlord Mediation

- Provider - Fair Housing Commission: Tenant landlord mediation program that has resulted in at-risk individuals maintaining their housing.

Outreach Specialist

- PATH Shelter Worker: Samaritan House Emergency Shelter for Individuals received a half time PATH worker for the area. The PATH program provides specialized outreach, assessment, and case management to the homeless mentally ill.

Without many homeless programs available in the region, prevention is a critical component of alleviating homelessness. Coordination with community systems such as; mental health, public health, welfare and children's services will be necessary to ensure that individuals and families don't fall into homelessness.

The Prevention Committee identified a number of gaps in the prevention continuum that, once addressed with targeted goals and action steps, could prove useful to closing the front door of homelessness.

Prevention Objective: Increase prevention resources available to those at-risk of homelessness. By closing the front door we can limit the numbers of households falling into homelessness and thereby limit the eventual problem of becoming chronically homeless

<p>Goal: Create Case Manager Position for follow up and stabilization services. There are limited case management services in Taunton available to households after their initial determination of crisis assistance. The existing Community Liaison worker is able to field calls and make referrals but not available for ongoing support or follow up.</p> <p>Action Step: Outreach to key municipal offices</p> <p>Action Step: Engage community organizations that provide emergency financial assistance in identifying funding sources and defining responsibilities</p> <p>Action Step: Taunton Housing Authority and Community Care Services coordinated on an application for specialized case manager position through HPRP funds</p> <p>Action Step: Determine who will submit application for funding</p> <p>Action Step: Submit application for funding</p>	
Responsible Party:	Community Care Services and The Taunton Housing Authority
Timeframe:	2011-2012
Funding Source:	HPRP funds
<p>Goal: Improve access to prevention resources</p> <p>Action Step: Ensure dissemination of the MASS 2-1-1 call in line. This line is a non-emergency line, much like 911 or 411, that can connect people to services.</p> <p>Action Step: Coordination and collaboration with the regions landlord associations around education, resources and referrals.</p>	
Responsible Party:	United Way of Greater Attleboro / Taunton
Timeframe:	Ongoing
Funding Source:	TBD
<p>Goal: Create a housing court presence at the Taunton Municipal Court.</p> <p>Action Step: Explore possibility of locating the Tenancy Preservation Project in Taunton. This program works to prevent homelessness among people with disabilities. TPP works with the Housing Courts, and those state departments (DMH, DDS, DCF, DPH</p>	

and DTA) that serve individuals and families with disabilities. The TPP workers works with the individual at risk to determine the reason for eviction, identify services, and develop an individual serve plan to maintain tenancy. If the person cannot stay in their home, the TPP worker will coordinate a placement to avoid homelessness. This program is very effective but unfortunately, without a location in the Taunton Court, it is not as available to those at risk in the region.

Responsible Party: South Coastal Counties Legal Services
 Timeframe: 2013
 Funding Source: TPP program funds
 Explore additional resources

Goal: Provide information on available utility assistance, particularly to assist with the problem of arrearages for both homeowners and renters. The region has seen an increase in arrearages and it is impacting foreclosures, evictions and utility shutoffs. Regional Departments of Public Works provide support agencies with a comprehensive document of all pertinent resources and funding available to clients at risk.

Action Step: Review and identify all programs available

Action Step: Review and identify any additional resources

Action Step: Provide homeowners and renters with information on financial assistance for qualified applicants for rent, mortgage, utility payment and fuel

Action Step: Review and summarize programs for energy efficiency and conservation and provide the information to those at risk

Action Step: Provide education and money management training

Responsible Party: GATCH SubCommittee to contact: TMLP, Water Department, Taunton Taunton Emergency Task Force, The Greater Attleboro District of St. Vincent DePaul Society, The Attleboro Council of Churches, Pro-Home, American Credit Counseling, Columbia Gas of Massachusetts

Timeframe: 2013

Funding Source: United Way of Greater Attleboro / Taunton, St Vincent DePaul, Municipal funds, FEMA

Goal: Develop an abatement policy for eligible owners and renters. Currently water and sewer shutoffs in the Cities are having an impact on those at-risk of homelessness. Develop a policy and process for abatements for those in need and ensure that owners, renters and agencies aware of available resources.

Action Step: Review present policies and practices

Action Step: Develop abatement policy

Action Step: Obtain City approval

<p>Responsible Party:</p> <p>Timeframe:</p> <p>Funding Source:</p>	<p>Action Step: Educate the organizations, homeowners and renters of the programs available for abatements and conservation</p> <p>Action Step: Provide education and money management training</p> <p>Water Department, Taunton</p> <p>2013</p> <p>None Required</p>
<p>Responsible Party:</p> <p>Timeframe:</p> <p>Funding Source:</p>	<p>Goal: Increase outreach to veterans by ensuring that the city and town veterans agents participate regularly in planning sessions related to solving and serving the homeless.</p> <p>Action Step: Contact veteran's agents from each city or town to encourage involvement and coordination</p> <p>GATCH</p> <p>South Coast Regional Network</p> <p>ASAP</p> <p>None Required</p>
<p>Responsible Party:</p> <p>Timeframe:</p> <p>Funding Source:</p>	<p>Goal: Explore and encourage development of programs to connect young adults to community supports.</p> <p>Action Step: Complete development of the Youth Center</p> <p>Action Step: Fill Youth Outreach positions</p> <p>Action Step: Ensure their interests are represented in meetings.</p> <p>Action Step: Work with schools to identify at-risk youth and refer them to appropriate programs</p> <p>Action Step: Work with corrections department and courts to direct individuals to appropriate community programs and resources.</p> <p>Community Care Services, Inc.</p> <p>McKinney Vento School Liaisons</p> <p>Ongoing</p> <p>Various grants and foundations to be explored</p> <p>United Way of Greater Attleboro / Taunton</p> <p>Limited funds through Shannon Grant have been approved.</p>
	<p>Goal: Increase availability of foreclosure programming and financial literacy programs to help avert foreclosures.</p> <p>Action Step: Pro-Home foreclosure program will continue aggressive outreach</p> <p>Action Step: Continue to coordinate monthly financial literacy trainings</p>

Responsible Party:	Pro-Home
Timeframe:	Ongoing
Funding Source:	Various grant and foundations to be explored United Way of Greater Attleboro / Taunton Limited Neighborhood Stabilization Program funds available through the State

Supportive Services Committee: Gaps, Goals and Action Steps

For many chronically homeless households, access to flexible and consistent supportive services may be the key to accessing and maintain long term tenancy in affordable housing.

There are a variety of supportive services in the region for low-income individuals. Many of these programs are running at capacity. The majority of these services are not specifically targeted to homeless people and therefore unable to address the myriad of problems that face the chronically homeless in crisis. While the chronically homeless can participate in the ABE/GED program, it may be difficult for them to successfully complete the program while other issues, such as mental health needs and housing, remain unaddressed. It is critical for the continuum of supportive services for homeless people to remain connected. The GATCH and their system of committees provide a good opportunity for this.

The Supportive Services Committee conducted an inventory of service programs in the region which identified the following available programs:

Case Management: Samaritan House and the Family Resource Center provide case management to their shelter guests including those who are chronically homeless. Community Counseling of Bristol County (CCBC) provides case management services which include specialized case management for those chronically homeless persons with mental illness and/or substance abuse. United Way of Greater Attleboro/Taunton partners with the programs listed above by supporting these two positions. Pro Home is offering financial literacy and money management training. Pro Home's program also teaches homeless persons how to develop positive relationships with banks. American Credit Counseling offers seminars and one-on-one counseling throughout the region.

Life Skills: The Family Resource Center (family shelter) provides life skills training on parenting, budgeting, money management and other daily living skills necessary to transition to permanent housing and self-sufficiency for their families who may be chronically homeless. The Family Resource Center is currently working with American Credit Counseling to bring their seminars to the shelter, which helps to avoid the barriers of daycare and transportation.

Alcohol and Drug Abuse Treatment: The Department of Mental Health has an indigent care pool which allows CCBC to provide alcohol and drug treatment services to chronically homeless clients with no insurance. The Department of Mental Health provides emergency services for alcohol and drug treatment for their clients and has a sophisticated inpatient treatment program. High Point Treatment Centers will take uninsured individuals and families for alcohol and drug abuse treatment, many of those referred are homeless. CCBC, the largest provider of alcohol and drug abuse treatment in the area, has a sophisticated network of programs which includes outpatient, detoxification, and short-term residential treatment services. In addition there a number of AA, NA, ALANON, and other peer lead support groups in the region.

Mental Health Treatment: CCBC's Community Rehabilitation Services and Community Support Services provides intensive case management and mental health treatment for the mentally ill, many of whom are homeless. In addition CCBC has an array of transitional housing programs providing housing and mental health services to the homeless. DMH case management, DMH funded contract with CCBC for a program of Assertive Community Treatment (PACT), which provides comprehensive treatment rehabilitation and support services to mentally ill adults without insurance. In addition, veterans can receive metal health services at the Veteran's Hospital located in the region.

Education: The Family Resource Center provides children enrichment activities for the children at the shelter. The Department of Mental Health's "Community Career Links" program helps those homeless with a serious mental illness access funding for support for higher education as part of their vocational plan. The various DVS representatives can refer and help chronically homeless veterans qualify for funding for higher education.

Child Care: Welfare to Work grant providing child care subsidies for up to one year and one additional year if DTA evaluation cites a continued need. Also, the region is part of a statewide childcare program funded by the Office for Children which provides child care subsidies based upon a sliding scale fee. The region also receives a Department of Education Grant to fund child care for working parents and parents in school and/or participating in an employment and training program, this includes homeless parents. Additional child care assistance is provided at or by the Taunton Family Center and Horizons for Homeless Children.

Transportation: United Way of Greater Attleboro/Taunton funds programs that provide assistance for transportation such as Community Care-A-Vans, Med Wheels, as well as, transportation for children to attend Triumph, Inc. and Markman Childcare Programs. CCBC also has funding through HIV client services to provide transportation to clients with AIDS/HIV. The Department of Mental Health has contingency funds for daily needs, including transportation.

Other: The United Way of Greater Attleboro / Taunton funds MASS 2-1-1, and emergency food assistance for the homeless. There are area soup kitchens and food pantries serving the homeless and those at risk of homelessness.

In addition a systematic review of gaps in the service delivery system identified a number of gaps areas that, with effective goals and action steps, could be alleviated.

Supportive Services Objective: To provide adequate flexible supportive services to assist those people who are chronically homeless in need of assistance to make the transition to permanent affordable housing

<i>Goal:</i> Increase access to legal services.	
<i>Action Step:</i> Identify funding for staff hours	
<i>Action Step:</i> Engage New Center for Legal Advocacy	
<i>Action Step:</i> Improve Outreach and transportation.	
<i>Action Step:</i> Improve coordination with the Senior Law Project for Elders to ensure that the homeless have improved access	
Responsible Party:	South Coast Counties Legal Services
Timeframe:	2013
Funding Source:	United Way of Greater Attleboro/Taunton and additional grants and foundations to be explored
<i>Goal:</i> Improve transportation access for the chronically homeless.	
<i>Action Step:</i> Increase the number of available bus passes and explore the possibility of monthly passes for the chronically homeless	
<i>Action Step:</i> Develop system for transportation to Housing Court	
<i>Action Step:</i> Identify \$10,000 in new resources to fund needed bus passes	
Responsible Party:	GATCH, Taunton Emergency Task Force,
Timeframe:	2013
Funding Source:	Various grant and foundations to be explored
<i>Goal:</i> Open the Self Sufficiency Collaborative Center (drop in center).	
<i>Action Step:</i> Continue to seek Public Support	
<i>Action Step:</i> Identify a developer for the parcel	
<i>Action Step:</i> Establish a Governance Committee to explore possible 501©3 status and develop a mission statement, vision statement, and program goals for the Center.	
<i>Action Step:</i> Research and visit other similar programs in Massachusetts and Rhode Island to understand best practices.	
<i>Action Step:</i> Design program and develop collaborations (MOUs) with any agencies/programs that may be available on site.	
Responsible Party:	The Self Sufficiency Coalition

Timeframe:	2014
Funding Source:	Various grant and foundations to be explored
<p>Goal: Increase resources to provide supportive services to the chronically homeless. Limited availability to supportive service dollars has resulted in a decrease in the number of providers able to apply for the Continuum of Care permanent housing bonus for the chronically homeless.</p> <p>Action Step: Individual agencies who serve homeless people will continue to apply for additional supportive services dollars. Funds will be sought from all sources: federal, state, local and private.</p> <p>Action Step: Provide training to all agencies serving chronically homeless people to ensure that the appropriate referrals are made for benefits assistance (SSI, SSDI, food stamps, Medicaid)</p> <p>Action Step: Ensure all agencies serving chronically homeless continue to be made aware of financial literacy trainings. These are free and offered locally by various agencies including American Credit Counseling Service.</p> <p>Action Step: Providers will work with chronically homeless people who want to participate in the Community Voice Mail Program. This program can help connect the chronically homeless to providers, employers and potential landlords.</p> <p>Action Step: Ensure chronically homeless people are aware of Mass211. Mass 2-1-1 is non-emergency resource and referral call line that is used to connect individuals and families to services. It is available via land line, cell phone and the web 24 hours a day, seven days a week.</p>	
Responsible Party:	GATCH
Timeframe:	Ongoing
Funding Source:	Various grant and foundations to be explored
<p>Goal: Provide ongoing support for Project Homeless Connect which provides one-stop access to services for homeless and at-risk individuals and families in the Greater Attleboro/Taunton area and its surrounding communities</p> <p>Action Step: Secure the venue</p> <p>Action Step: Fundraise for the event</p> <p>Action Step: Market the event</p> <p>Action Step: Coordinate free transportation</p>	
Responsible Party:	GATCH/United Way of Greater Attleboro/Taunton
Timeframe:	Annually
Funding Source:	Sponsorships and donations/United Way of Greater Attleboro/Taunton

Affordable Housing Committee: Gaps, Goals and Action Steps

Access to affordable and safe housing is the key to solving homelessness. Currently renters make up about 35% of the Taunton housing market with a vacancy rate of 4%. In Attleboro, renters make up 32% of the housing market with a vacancy rate of 3.5%. The regions average rents are about \$700 for a one bedroom apartment, this is a high rent for the region and leaves many priced out. The tight market and high rents make it hard for those people living on financial assistance or earning low wage jobs to stabilize in appropriate affordable housing.

The problem is particularly dire for the chronically homeless as there is a stigma associated in renting to this population. Local homeless providers have worked hard to establish relationships with area landlords to secure housing for their homeless clients.

Lack of housing can be the impetus for other problems such as health crisis, criminal activity, and substance abuse. All of these can contribute what could be a cycle of homelessness. With appropriate supported housing models and *Housing First* units, the region hopes to bring security and safety to many of these people's lives.

The region's current inventory of permanent supported housing units available to the chronically homeless has been developed through annual funding requests to HUD for housing assistance. The first application was submitted in 2004 by the Attleboro Area Council of Churches. In 2004, HUD designated a specific funding initiative called the Samaritan Initiative in its Notice of Funding Availability (NOFA) for Continuum of Care funds. Since that first application, the Region has applied for additional funds and now has 19 units housing 25 homeless people with one more request pending (Moving Forward project).

Year Awarded	Provider	Program	# of Units	# served
2004	Attleboro Area Council of Churches	Homes With Heart	8	8
2005	Catholic Social Services	Housing Now	2	4
2006	New Samaritan	Catholic Social Services	2	4
2007	Attleboro Area Council of Churches	New Opportunities	3	3
2008	Catholic Social Services	Project Success	2	4
2010	Community Counseling of Bristol County	Welcome Home	2	2
2011	Community Counseling	Moving Forward	4	4

	of Bristol County			
		TOTAL	23	29

In 2009 the region applied for a rapid re-housing program for homeless families. This project was successfully awarded funds to serve two homeless families.

The critical value of these programs can be seen in the impact they have on people lives. Homes With Heart (HWH) serves some of the most difficult to serve chronically homeless by moving them into apartments with supportive services. One of the HWH case managers shared the following about one of her residents:

Tom came to our program from a local “tent city”, in 2006. He had been homeless and living outdoors for over six years. After securing an apartment for Tom, we were able to get him emergency cash assistance from DTA, as well as SNAPs and MassHealth coverage. Tom came to us with both mental health and addiction issues, which were addressed through counseling and medical treatment. After a three-year “discussion” with Social Security, Tom was approved for disability benefits in 2010. Recently, Tom has been hired by a local business to work ten hours a week. Tom has regained not only his sense of self, but also his place in the community at large.

While affordable permanent housing is the ultimate goal for the chronically homeless the region does employ a continuum of housing options for the homeless:

- (1) Emergency Shelter: Emergency Shelters are defined as places not meant for long term accommodation. Guests may not have rooms but often are assigned a bed in a large open area. The region has one emergency shelter.
- (2) Transitional Shelter: Transitional housing is temporary housing, not to exceed twenty four months, whose clients are homeless and, as such, are referred from the shelters, the detoxification programs and the outreach and assessment programs working with the street homeless and the emergency shelter providers. Transitional housing works best when it is combined with supportive services, which may be provided on or off site, to facilitate the movement of the residents towards self sufficiency and permanent affordable housing.
- (3) Permanent Supported Housing: This is permanent affordable housing which incorporates supportive services into the design to enable the homeless to maintain long term tenancy. Residents of this type of housing include the chronically homeless who often cannot stabilize in permanent housing without the supportive services.

The Affordable Housing Committee decided to look at all aspects of the continuum of housing choices when developing their objectives and action steps but prioritized the development for permanent affordable housing for their goals and action steps.

Housing Objective: Provide a variety of housing choices for chronically homeless persons.

<p>Goal: Increase availability of rental vouchers targeted to the region.</p> <p>Action Step: Housing Authorities will continue to apply for new Mainstream Section 8 vouchers as available as these have been successfully used to house the chronically homeless.</p> <p>Action Step: Housing Authorities will work with the Department of Mental Health, Department of Developmental Disabilities and the AIDS Bureau to target Section 8 certificates to chronically homeless served by the state agencies. The State agencies, though supplemental state resources such as the Homeless Special Initiative, will provide the flexible supports to these tenants once housed.</p> <p>Action Step: providers will continue to coordinate with those regional Veterans centers that have access to VASH vouchers.</p> <p>Responsible Party: Attleboro Housing Authority Taunton Housing Authority</p> <p>Timeframe: As NOFAs announced</p> <p>Funding Source: HUD</p>	
<p>Goal: Develop more <i>Housing First</i> units in the region. <i>Housing First</i> (or rapid re-housing) is an approach to housing for the homeless that prioritizes housing as a first step as opposed to moving the chronically homeless through the continuum of care (emergency shelter to transitional housing to permanent housing). The continuum of care approach also includes intensive supports to prepare individuals for permanent housing. The <i>Housing First</i> model may or may not include services. Primarily the model has been employed successfully in the region with the inclusion of flexible wrap around services.</p> <p>Action Step: GATCH will continue to apply for Continuum of Care funds from HUD to develop more <i>Housing First</i> units.</p> <p>Action Step: Agencies will identify resources to serve those tenants in <i>Housing First</i> units with flexible services to ensure long term tenancies.</p> <p>Responsible Party: GATCH, City of Attleboro, City of Taunton</p> <p>Timeframe: Ongoing</p> <p>Funding Source: HUD and partner agencies</p>	
<p>Goal: Develop more Permanent Supported Housing units for the chronically homeless. While <i>Housing First</i> is an important component of the housing continuum some individuals may prefer a more supported housing model.</p>	

<p>Responsible Party: Timeframe: Funding Source:</p>	<p>Action Step: GATCH will continue to apply for Continuum of Care funds from HUD to develop more Permanent Supported Housing units.</p> <p>Action Step: Agencies will work with various state agencies to identify housing and services resources to serve their clients in permanent supported housing.</p> <p>GATCH, City of Attleboro, City of Taunton Ongoing HUD and partner agencies</p>
<p>Responsible Party: Timeframe: Funding Source:</p>	<p>Goal: Leverage more private market housing resources in the community.</p> <p>Action Step: Develop relationships with landlords to improve coordination of available low cost market rental units.</p> <p>Action Step: GATCH will explore the possibility of developing a coalition of landlords.</p> <p>Action Step: Explore the possibility of developing a set aside program for chronically homeless units in new housing projects proposed in the Cities through inclusionary zoning. This program would require set asides for low income units or specific homeless units. For those developers opting out of the program there would be a fee that would be deposited into an Affordable Housing Trust Fund which would be used to support the acquisition and development of affordable housing.</p> <p>Affordable Housing Committee, GATCH Ongoing City of Attleboro and City of Taunton Community Development Offices</p>
<p>Responsible Party: Timeframe: Funding Source:</p>	<p>Goal: Review zoning ordinances and other regulatory barriers that may make it difficult to develop permanent supported housing or other low cost housing.</p> <p>Action Step: Conduct comprehensive review of all zoning and other regulations that may restrict development of affordable housing.</p> <p>Action Step: If necessary, work to eliminate these barriers.</p> <p>City of Attleboro and City of Taunton Community Development 2014 City staff time</p>
	<p>Goal: Access, through linkages and referral, the Veterans Affairs Supportive Housing Vouchers (available to region through New Bedford Housing Authority).</p> <p>Action Step: DVS Representatives, working with other outreach</p>

and supportive service workers, will identify VA eligible homeless veterans and refer to the VAMC Homeless Services Program.

Action Step: CCBC will implement Welcome Home, a new permanent supported housing program for chronically homeless veterans.

Action Step: Work the Local Housing Authorities to verify eligibility (income status) for the voucher.

Action Step: Identify availability of ongoing case management resources beyond those provided by DVS.

Responsible Party: GATCH
Timeframe: ongoing
Funding Source: Vouchers available

Employment Committee: Gaps, Goals and Action Steps

While there are many factors that contribute to homelessness the primary reason is due to limited financial resources that limits one's ability to secure or maintain housing. Ones financial resources can be improved by either secure employment, accessing needed benefits (TANF, SSI, etc), or access to financial services (financial literacy classes, job coaches, workforce development training etc). Securing financial self sufficiency is critical to maintaining long term permanent housing.

The National Low Income Housing Coalition (NLIHC) reports that in Massachusetts, the average Fair Market Rent (FMR) for a two-bedroom apartment is \$1,193. (the 2011 FMR in Taunton is \$1,135 for a two bedroom and in Attleboro it is \$977). HUD recommends that households pay no more than 30% of their income toward housing costs. More than 30% of income paid toward housing can result in a person being considered *housing poor*, meaning that other important items like health care, transportation and food may not be fully covered.

In order to afford a two bedroom apartment, NLIHC reports that a household must earn approximately \$3,977 monthly or \$47,719 annually. For low-income workers this is simply not attainable. The disconnect between wages and rents often results in households being structurally separated from the housing market. This means that people, who do not fall directly into homelessness, find themselves among the ranks of the *hidden homeless*. These are the doubled-up individuals or families, living in overcrowded situations with friends and family. Eventually, without interventions and supports, these people will join the ranks of the not so hidden homeless.

The problem is even more severe for those households receiving benefits due to a

disability; a disability that may make it difficult for them to work. Supplemental Security Income (SSI) payments for an individual are, on average, \$751 a month. If SSI represents the sole income source, it would be close to impossible to rent an apartment in the region.

Regional unemployment is also a factor. The region has seen high unemployment over the last several years. While the number fell slightly between 2010 and 2011, the decrease can be attributed to those who may no longer be looking for work or the underemployed.

	TAUNTON	ATTLEBORO
June 2010	9.4%	9.8%
June 2011	9.0%	9.3%

Recognizing that employment is a critical indicator of long term stability in housing, the Employment Committee of the Ten Year Plan Working Group took an inventory of the current services and the gaps in the region. The committee also looked closely at workforce development programs.

Current Inventory: Employment Services in Place:

Samaritan House and the Family Resource Center provide job counseling and job readiness training to their shelter guests. CCBC is a provider in the federal “Ticket to Work” program. Ticket to Work provides vocational and pre-vocational services through the State of Massachusetts Rehabilitation Commission, and comprehensive vocational assessments and computer literacy.

The Department of Mental Health’s “Community Career Links” program helps those chronically homeless with a serious mental illness access funding for support for higher education as part of their vocational plan.

Objective: To increase access to jobs for the homeless; provide training and education to regional business interested in employing the homeless; increase job training and workforce development programs in the area specifically targeted to the homeless.

Goal: Develop a PASS plan for Continuum of Care member agencies. The PASS plan will outline methods for those chronically homeless on SSI or SSDI to build a work history without jeopardizing their benefits.

Action Step: Engage the Massachusetts Rehabilitation Commission as a partner

Responsible Party: Community Counseling of Bristol County
Timeframe: Ongoing
Funding Source: Not required

Goal: Increase access to vocational and pre-vocational training. This will assist those individuals with SSI or SSDI histories whose employment histories are limited.

Action Step: Engage the Massachusetts Rehabilitation Commission as a partner

Responsible Party: Community Counseling of Bristol County
Timeframe: 2016
Funding Source: Not required

Goal: Regional Summit on Increasing Self-Sufficiency through Education and Workforce Development

Action Step: Identify stakeholders, materials, agenda

Action Step: Develop Comprehensive Resource Guide

Action Step: Conduct Surveys (Case Managers, Service Providers, Clients)

Action Step: Conduct post Summit Follow-up and implementation

Responsible Party: Janet Richardi, South County Regional Network Coordinator
Timeframe: 2011 - 2012
Funding Source: Not required

IMPLEMENTATION

Implementation of the Ten Year Plan will be coordinated and overseen by the GATCH. Upon final ratification of the Plan by the Cities and the Leadership Committee, the Ten Year Plan Working Group was absorbed into GATCH. GATCH will monitor the progress of ending chronic homelessness annually.

GATCH will report to both the City of Attleboro and the City of Taunton on progress. Progress reports will be made in the second quarter of each year, after the annual point in time count of the homeless. GATCH will report on the number of chronically homeless, new beds available to the chronically homeless that have been brought on line and highlight any of the goals of the plan that remain to be accomplished. The Cities and GATCH will work together to ensure all goals of the Plan are met.

CONCLUSION

While the region has made progress in combating the problem of chronic homelessness, including adding 22 targeted homeless units, there is still work to be done. This plan, and ongoing monitoring provided by GATCH, will ensure that we continue to plan for the needs of this population. The annual point in time counts show a change in the regional demographics of homelessness throughout the years, with more families presenting themselves as homeless. The current economic crisis will continue to put pressure on households at-risk. While we hope to continue to see a decline in our homeless numbers, the current recession and foreclosure crisis may result in an increase in homelessness. This plan will help us respond, no matter what the demand.

Greater Attleboro & Taunton Coalition to End Homelessness
Member Agencies

Attleboro Area Council of Churches
Attleboro City Hall
Attleboro Community Development
Attleboro Council on Aging
Attleboro Health Department
Attleboro Housing Authority
Attleboro Police Department
Attleboro Public Schools
Bridges of Hope / Salvation Army
Bristol County Savings Bank
Catholic Social Services
Commonwealth of Massachusetts / Department of Transitional Assistance
Commonwealth of Massachusetts / Department of Mental Health
Commonwealth of Massachusetts / Department of Public Health
Commonwealth of Massachusetts / Massachusetts Rehabilitation Commission
Community Care Services, Inc.
Community Counseling of Bristol County, Inc
BETA – Community Partnerships
Congressman James McGovern
Eliot Mental Health
Morton Hospital
New Hope, Inc.
North Attleboro Council on Aging
Pro-Home
Samaritan House
Seekonk Police Department
Self Help, Inc.
Seekonk Human Services
South Coastal Counties Legal Services
South Coast Regional Network
St Stephen's SVDP
St Vincent DePaul
Taunton City Hall
Taunton Community & Economic Development Department
Taunton Council on Aging
Taunton Department of Human Services
Taunton Emergency Task Force
Taunton Family Center
Taunton Housing Authority
Taunton Police Department
Triumph, Inc. Head Start
United Way of Greater Attleboro / Taunton

Attleboro / Taunton Regional Homeless Services Inventory Chart

(1) Provider Organizations	(2) Prevention					(3) Outreach			(4) Supportive Services									
	Mortgage Assistance	Rental Assistance	Utilities Assistance	Counseling/Advocacy	Legal Assistance	Street Outreach	Mobile Clinic	Law Enforcement	Case Management	Life Skills	Alcohol & Drug Abuse	Mental Health Counseling	Healthcare	HIV/AIDS	Education	Employment	Child Care	Transportation
Area Community Council													X				X	
Associated for Human Services									X	X								
Attleboro Area Council of Churches		X	X	X		X			X	X					X	X		X
Attleboro Area Homeless Coalition	X	X																X
Catholic Social Services	X	X	X	X	X				X	X		X			X			X
Community Care Services			X	X					X	X	X	X						X
Community Counseling of Bristol County		X		X		X			X	X	X	X		X	X	X		X
Department of Human Services	X	X	X															
Department of Mental Health									X			X						
Family Resource Center				X					X	X		X			X	X		
New Center for Legal Advocacy					X													
New Hope				X					X	X					X	X		X
Pro Home	X			X						X								
Taunton Community Policing								X										
Taunton Housing Authority		X	X															
Taunton Human Services			X	X		X			X	X								X
Saint Vincent de Paul			X															
Samaritan House				X					X	X					X	X		
South Coastal Counties Legal Services Inc.				X	X													
Tri City Mental Health						X			X	X		X						
United Way				X														X

Regional Chronic Homeless History

Year	Number of Chronically Homeless	Number of Permanent Supported Housing beds for the Chronically Homeless
2002	77	0
2003	Not Available	0
2004	94	8
2005	Not Available	25
2006	62	25
2007	45	25
2008	40	20
2009	40	20
2010	17	22
2011	18	22

Notes:

2003: There was no Point in Time Count

2004: First targeted housing program (Homes with Heart)

2005: The Point in Time count was an incorrect extrapolation, so left of chart

2007: Decrease in beds from 25 to 22 was due to a counting error. Three DMH group home beds were mistakenly categorized as *designated* to the chronically homeless.

Designated Permanent Housing for the Chronically Homeless

Year Awarded	Provider	Program	# of Units	# served
2004	Attleboro Area Council of Churches	Homes With Heart	8	8
2005	Catholic Social Services	Housing Now	2	4
2006	New Samaritan	Catholic Social Services	2	4
2007	Attleboro Area Council of Churches	New Opportunities	3	3
2008	Catholic Social Services	Project Success	2	4
2010	Community Counseling of Bristol County	Welcome Home (for chronically homeless veterans)	2	2
2011	Community Counseling of Bristol County	Moving Forward	4	4
		TOTAL	23	29

